

Application Data Sheet

Application Information

Application number::
Filing Date:: September 25, 2003
Application Type:: Non-Provisional
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??:
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: Eye Viewing Device Comprising Eyepiece And
Video Capture Optics
Attorney Docket Number:: 281-329.02 Con
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 15
Small Entity?:: No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ervin
Middle Name::
Family Name:: Goldfain
Name Suffix::
City of Residence:: Syracuse
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 4422 Cleveland Road
City of Mailing Address:: Syracuse
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13215

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Allan
Middle Name:: I.
Family Name:: Krauter
Name Suffix::
City of Residence:: Skaneateles
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 2224 West Lake Road
City of Mailing Address:: Skaneateles
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13152

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Chris
Middle Name:: R.
Family Name:: Roberts
Name Suffix::
City of Residence:: Skaneateles
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 740 Sheldon Road
City of Mailing Address:: Skaneateles
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13152

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Steven
Middle Name:: R.
Family Name:: Slawson
Name Suffix::
City of Residence:: Camillus
State or Province of Residence:: NY
Country of Residence:: US
Street of Mailing Address:: 405 Oakridge Drive
City of Mailing Address:: Camillus
State or Province of Mailing Address:: NY
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 13031

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: William
 Middle Name:: H.
 Family Name:: Lagerway
 Name Suffix::
 City of Residence:: Auburn
 State or Province of Residence:: NY
 Country of Residence:: US
 Street of Mailing Address:: 3912 Mandy Rue
 City of Mailing Address:: Auburn
 State or Province of Mailing Address:: NY
 Country of Mailing Address:: US
 Postal or Zip Code of Mailing Address:: 13021

Correspondence Information

Correspondence Customer Number:: 20874

Representative Information

Representative Customer Number::	20874
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation Of	09/862,636	May 22,2001
09/862,636	An Application Claiming The Benefit Under 35 USC 119(e)	60/206,356	May 23, 2000
09/862,636	Continuation-In-Part Of	09/783,481	February 14, 2001
09/783,481	Continuation-In-Part Of	09/444,161	November 22, 1999
09/444,161	Continuation-In-Part Of	09/198,545	November 24, 1998

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::